POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		4/16
O.I.P.E. CLASSIFIER		32	5/4
FORMALITY REVIEW	TO	870	00-01-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim			Date								
Final	Original	10/19/23	3/27/04								
1	✔	✔									
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If more than 150 claims or 10 actions
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H.S.
6.4.01